

APPENDIX J

WRHA PHARMACY PROGRAM
Verifier Structured Practical Evaluation – Global Rating Scale

Employee Name: _____

Employee Number: _____

<i>PART A: Complete for ALL structured practical evaluation (SPE) shifts (3=Minimally Competent)</i>				
Documentation of Verification Tasks				
1	2	3	4	5
Documentation of verification tasks is not appropriate or timely.		Verification tasks are usually documented in a timely, complete, correct manner.		Verification tasks are always documented correctly, completely and in a timely manner.
Responsibility for Verification Tasks				
1	2	3	4	5
Verification is performed on items for which authorization has not been granted by the Manager, or items are released without complete verification.		Verification tasks are completed using approved procedures but tasks are not always completed in a timely manner.		Verification tasks are completed in a manner that consistently places a high priority on patient safety while taking into account other tasks that also need to be completed within the workday.
Item Release/Distribution				
1	2	3	4	5
Fails to ensure that a pharmacist has been involved in the initial evaluation of the patient, medication order, batch card, or recipe before release or distribution of the verified item.		Appropriately differentiates items that may be released or distributed without a pharmacist's involvement from those that require a pharmacist's involvement, but sometimes requires input from others to arrive at the decision.		After verification, items are appropriately released and distributed for patient use, taking into account circumstances that require pharmacist involvement in the initial evaluation of the patient and medication order.
Collaboration and Communication				
1	2	3	4	5
Collaboration & communication with the pharmacist and other pharmacy team members regarding verification tasks and correction of erroneous items (if applicable) is not present at all, is not apparent, or is ineffective.		Collaboration & communication with the pharmacist and other pharmacy team members regarding verification tasks and correction of erroneous items (if applicable) is present but is not always performed effectively, or consistently.		Collaborates & communicates reliably and effectively with the pharmacist & other pharmacy team members about verification tasks, erroneous items & required correction (if applicable), and measures to prevent future errors or close calls.

Continue to Part B on other side of page

PART B: Complete ONLY if errors were present during this shift (3=Minimally Competent)

Attach Quality Assurance Form(s) completed by the trainee or assessor for error(s) present during this shift

Error Identification				
1	2	3	4	5
Critical errors are routinely missed, not accurately identified, and/or not appropriately stated.		Errors are identified reliably but may be categorized imprecisely or the potential impact of an error may not always be appreciated.		Effectively applies information, standards, procedures and protocols to accurately, precisely and reliably identify errors and the potential impact on the patient.
Error Interventions				
1	2	3	4	5
Error interventions are not appropriate; best practices for correction of the erroneous item are not considered or performed.		Error interventions are appropriate and timely; usually incorporates best practices for correction of erroneous items.		Error interventions are appropriate, specific for the error that has been identified, solution-focused, and incorporate best practices in error correction and strategies to prevent future similar events.
Error Documentation				
1	2	3	4	5
Policies, directives, procedures and best practices for error documentation are not considered or performed, or are not performed in a timely manner.		Documents errors/close calls (near miss/good catch events) but doesn't always adhere to all policies, directives and procedures, or doesn't always document effectively, legibly, or in a timely manner.		Error/close call documentation is always done in a complete and timely manner according to policies, directives, procedures.
Overall Assessment of the Verifier's Level of Performance (Complete for ALL shifts: Select A, B or C)				
A = Incompetent Unacceptable Level of Performance (Part A score is less than 12; Part B score is less than 9)		B = Minimally Competent Minimally Acceptable Level of Performance (Part A score is 13-15; Part B score is 9-11)		C = Proficient Acceptable Level of Performance (Part A score is higher than 15; Part B score is higher than 11)
Performance of verification tasks is inaccurate or incomplete, inappropriate or outside of the verifier's scope of practice, or inefficient indicating a lack of knowledge and/or undeveloped verification skill or behaviour		Verification accuracy is consistent and other key components of verification are demonstrated, but documentation, problem-solving, collaboration, communication, or decision-making is not always effective, consistent, efficient or timely.		Verification is accurate and the approach to verification tasks consistently integrates all expected components.
Comments:				

Assessor Name (print): _____

Assessor Signature: _____

Date (dd/mm/yr): _____

*Pharmacist to forward completed form to Pharmacy Technician Manager on **each day** of Structured Practical Training*